

Demir Çubuk Üzerine Düşme Sonucu Meydana Gelen Delici Göğüs Duvarı ve Üst Ekstremite Travması

Penetrating Chest Wall and Upper Extremity Trauma Secondary to Falling on an Iron Rod

Delici Göğüs ve Üst Ekstremite Travması / Penetrating Chest and Upper Extremity Trauma

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A 55-year-old male admitted to the emergency room after falling down from a height on an iron bar. Physical examination showed the iron rod with entry side at the right parascapular area and exit side at right posterior upper extremity without any visceral injury (Figure 1). The rod was readily mobile on exertion. He was hemodynamically stable. A superficial laceration of the scalp was sutured. Breath sounds were normal and peripheral pulses were palpable. The patient was transferred to the operating room and the rod was pulled out under sedation (Figures 2,3). He was discharged on the fourth day uneventfully.



Figure 1. Patient in emergency department entry point seen at the back.



Figure 2. Patient on the operating table exit point seen at the upper extremity.



Figure 3. Patient on the operating table just before removal of the rod.

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